

SOUTHERN NEVADA REGIONAL RECOVERY ORGANIZATION

WEEKLY ACTION PLAN INITIAL REPORT October 21, 2020















Overall Assessment:

Clark County has seen an uptick in both cases per 100,00 and test positivity rate. This increase was anticipated as the general public has been heading out into the community more frequently, in conjunction with the opening of more activities. Also, the increase in cases is expected as more people are getting tested. For example, on October 10th, we reported 9,361 tests conducted and on October 13th, we reported 14,003 tests conducted. The re-opening of multiple venues has been vital for the mental well-being of the community, along with the financial impact the pandemic has caused.

It would be extremely difficult to pinpoint one establishment or activity over another as to where transmission has occurred. However, with the Critical Statewide Metrics the State of Nevada has drafted, it gives Southern Nevada the ability to make sure proper steps are in place to safely meet the needs of the community. Our hospital capacity remains stable, please see below. PPE for the Southern Region remains strong. Testing Capacity and Contact Tracing reveals to be keeping up with one another. Vulnerable Populations such as Skilled Nursing Facilities, along with Rehabilitation Facilities and Correctional Facilities are protecting their occupants. Enforcement continues to meet its weekly objectives and has a compliance rate of 97.5%, while continuing to use OSHA data for concentrated inspections.

On October 20, 2020, the Clark County Office of Emergency Management (CCOEM), along with the Medical Surge Area Command (MSAC) participated in a call with the four hospital groups in Southern Nevada to ensure Clark County was still being responsible with regards to the ability to care for the needs of the residents and visitors in Southern Nevada. All four groups were adamant they could ensure the people seeking medical attention were being treated appropriately.

Each hospital group stated they had the necessary Personal Protection Equipment, adequate medications, enough ventilators, and their staffing levels are having no issues to run the hospital (Intensive Care Units and the Emergency Rooms). CCOEM questioned if the number of patients per 100,000 is increasing, and the positivity rate is increasing, then how are the hospitals able to meet the high demand? It was agreed upon, by that group. the patients coming in with COVID-19 are younger and their hospital stay is quicker. Meaning, the patient-in patient-out time is faster than it was. This is expected as treatments continue to improve. It is important to note that while our positivity rate is increasing, the hospital infrastructure in southern Nevada is sound. Hospitals are reporting steady admissions related to COVID-19. Those who are admitted for COVID-19 are experiencing shorter lengths of stay with treatment of plasma and Remdesivir and are not needing as much ventilation or needing to be in the ICU. For elective surgeries, some hospitals are having only one patient per surgeon, which keeps the bed population down, but still improves the quality of life for those who need those elective surgeries.

Specific criteria for ongoing assessment:

Criteria	Last Updated 10/18/2020	Criterion Met	Criterion Not Met
Average Number of tests per day per 100,000 (14-day avg with 7-day lag) <150	215		Х
Case Rate per 100,000 last 30 days >200	421	Х	
Case Rate (Per 100,000) > 50 AND testing positivity > 7.0%	8.6%	Х	

^{*} A county is flagged for elevated disease transmission if it meets two of the three criteria in consecutive weeks.

Legend: Critical Statewide Metrics

Hospital Capacity	<85%	86% - 95%	>96%
Access to Personal Protective Equipment	> 3-month supply	1 - 3-month supply	< 1-month supply
Testing Capacity	>535/day	480-534/day	<480/day
Case Investigation and Contact Tracing	>90% of contacts, contacted within 48 hours	>80-89% of contacts, contacted within 48 hours	<79% of contacts, contacted within 48 hours
Protection of Vulnerable Populations	Minimal impact	Moderate impact	Significant impact
Enforcement	95% Compliance of businesses	85%-94% Compliance of businesses	<84% Compliance or did not meet min. # of inspections

Hospital Capacity

Χ

- ICU beds are at 62%, well within operational range.
- Ventilators reported at 26% in use.
- Staffing case by case (hospitals are all different).
- Medication treatments Remdesivir (Fed supplied based upon ICU count).
- PPE at least a 15-day supply is green, 7-14 yellow, < 6 red.
- Overall hospital capacity is holding steady. Additional information is supported by the attached Nevada Hospital Association report (Appendix A).

Mitigation Action:

- Reached out to FEMA, traveling nurses for staffing.
- Continue to monitor the surgical procedures daily.
- Hospitals reduce the number of visitors to patients.

Access to Personal Protective Equipment

X

- PPE is holding steady throughout the county.
- The Battelle system is being utilized for N95 masks, but will be decommissioned at the end of the year.
- Distribution priorities are as follows: 1. Acute Care Hospitals 2. First
 Responders 3. Skilled nursing, assisted living and other vulnerable populations
- Refer to PPE report (Appendix B).

Mitigation Action:

- Clark County MACC will continue to work with its community partners to ensure they are operating at a level equal to or greater than yellow.
- Jurisdictions are building PPE capacity for future resurgence of the disease.

Testing Capacity

Χ

- Testing criteria is as follows: symptomatic, asymptomatic, all ages, vulnerable populations, correctional facilities, SNF's, LTAC's, and "hot spots". Following the most recent CDC guidelines for testing will be adhered to.
- Targeted testing efforts---- As numbers are reported from the State of Nevada DHHS about vulnerable population facilities, the county and cities will contact those facilities and inquire about needs and determine if a strike team needs to be deployed or PPE needs to be provided.
- During the week of for Oct 6th Oct. 12th: 44,387 total tests; 6,341 tests per day.

Mitigation Action:

- Use zip code "heat maps" of positive COVID cases to identify areas in which to target specimen collection.
- Use case data from daily reports to identify the demographic populations with the most disease burden to conduct outreach clinics. Continue targeted testing in LTC, SNF, Senior Centers, elder care facilities and group homes to conduct specimen collection for this vulnerable population.
- Conduct test collection pop up events at businesses/facilities impacted by COVID-19 outbreaks, including the jails/detention centers, homeless encampments as necessary.
- Some SNHD case investigators/contact tracers are also being trained to do specimen collection.

Case Investigation and Contact Tracing



- Current contact tracing workforce 250 FTEs on case investigations, an additional 250 surge contact tracers through the state's contract with Deloitte.
- Percent of positive cases contacted within 24 hours: 96.3% (2924).
- Percent of positive cases contacted within 48 hours: 1.0% (30).
- Percent of positive cases contacted greater than 48 hours: 2.7% (83)
- Overview of contact tracing findings suggesting high-risk areas see bulleted item below *

Mitigation Action:

- The SNHD and the State of Nevada Health can provide local code enforcement offices with actionable trends data on repetitive contact tracing locations. Local Code Enforcement will follow up at those locations to ensure compliance and take necessary action. A heat map of those locations would be extremely helpful from any agency conducting contact tracing.
- Improve communication between SNHD and Local Jurisdictions.
- Improve communication between State, Local Health and EM.
- Solutions to ensure CBCS and testing locations are gathering correct information (*phone numbers) for contact tracing.
- Moving towards automated results being sent via text to improve timeframe on patient results.
- Percent of positive cases reported in the last 7 days will be contacted within 24 hours
- Address ways to track, gather and obtain critical information for contact tracing.
- Staffing needs to increase to the "30 contact tracers for every 100,000 persons"
- *SNHD produces daily reports tracking total case counts per zip code, in addition to monitoring case, hospitalization, and death rates by demographic. For the last 7 days there are 16 zip codes with greater than 150 cases per 100.000.
- SNHD recently mapped community testing locations to date, including classification of the site type, for planning purposes.
- The Covid TRACE app was released September 22, 2020.

Protection of Vulnerable Populations

- Χ
- Skilled nursing facilities see bulleted item below *
- Correctional facilities On 10/20/2020 for CCDC .2815% inmates are currently positive (2842 population, 8 positive)
- High-risk communities see bulleted item below **
- Collaborative data and trends collected from various sources: SNHD, unincorporated and incorporated jurisdictions.

Mitigation Action:

- Need greater oversight and enforcement from the State Department of Health and Human Services on long term care facilities. Local jurisdictions will continue to follow-up with high risk facilities and aid as necessary.
- Standard protocol for testing in skilled nursing facilities. Frequency?
- Oversight with HHS to include items such as housing, testing social service needs to get patients back in correct facility.
- Continue to evaluate our Public Messaging Campaign, along with consistent education.
- * SNHD and the MSAC have conducted sample collection at more than 25 of these facilities. We also have provided testing for those facilities that have had outbreaks. However, SNFs are now conducting their own testing through a directive from the State DBPH, Bureau of Healthcare Quality and Compliance. The Southern Nevada Public Health Laboratory (SNPHL) supports other testing with senior facilities coordinated through the MSAC. Collection kits are provided to strike teams and directly to facilities identified by MSAC.
- SNHD continues to conduct targeted and ongoing specimen collection at correctional facilities in Clark County. Instrumentation is currently being procured to allow some of these facilities to conduct their own testing.
- Currently all inmates, CCDC or NVC are tested for COVID-19 prior to admission into the facilities.
- Inmates are placed into cohort groups from booking for a 5-day mandatory quarantine where all inmates are tested for COVID-19 prior to being moved into the general population.
- Currently all inmates are required to wear masks. CCDC and NVC staff as well as anyone coming into their facilities for any reason, are also required to wear a mask to prevent the spread of COVID-19.
- Staggered feeding inside inmate cells
- ** SNHD and the MSAC use zip code "heat maps" of positive COVID cases to identify areas in which to target specimen collection. They also use case data from daily reports to identify the demographic populations with the most disease burden to conduct outreach clinics in those areas.

Enforcement

- X
- Overview of county/city agencies in enforcement.
- Overview of the number observations conducted by county/city enforcement officials.
- Overview of compliance rates during county/city observations.
- Overview of the number of violations and enforcement actions taken by county/city officials.
- Refer to the Consolidated Code Enforcement Report (Appendix C).

Mitigation Action:

- The county/cities are reallocating resources such as putting programs in place to tap into retired law enforcement and utilizing existing part time code enforcement officers to assist with the demand from the contact tracing data.
- Consistent policy from those decision makers to ensure there is consistency throughout Southern Nevada.
- Local jurisdictions need to move to closures and suspensions of those businesses who are not adhering to guidelines, with potential minimum of 36-hour closures (first offense), up to 14 days (second offense) and/or citations, with possible appearance in front of a court official.
- For public health, deployment of "strike teams" to enforce possible closures and suspensions of business, County Wide, if they do not adhere to the guidelines. Closures will depend on severity of violation.
- Inspections would need to occur 7 days a week, 24 hours a day. Not just the normal M-F. 0700-1700.
- Ensure consistency with compliance across all the jurisdictions.
- Each jurisdiction is responsible for conducting the number of inspections proportionate to the number of physical business addresses located in their jurisdiction.
- Minimum of 750 businesses inspected a day (combined with random visits and data driven decision making).
- Refer to the Consolidated Code Enforcement Report (Appendix C).
- Addressing recently open businesses/activities with guideline changes.
- Addressing specific zip codes with "hot spots".
- Educate businesses and the general public of Directives and Safety regarding the requirement to wear a face mask in public, social distancing, and consistency with good hygiene practices.
- Review of business operational plans to ensure compliance and public safety.
- Respond to complaints in a timely manner.
- Courtesy visits to ensure compliance.

Historical data from 3/21/2020 is below for the Clark County Region.

- Locations Visited: 91,773
- Emergency Suspensions Issued: 72
- Misdemeanor Citations Issued: 21
- Notice of Civil Penalty Issued: 90
- Notice of Violation Issued: 345

- Verbal Warning Issued: 863
- Courtesy Notices Issued: 395
- Correction Notices Issued: 510
- Complaints: 6,402 Compliance Rate: 97.5%